

(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number: 0000044725 | Submit Date: 2018-02-27 | FRN: 0006160949

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/27/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0006160949	WRANGELL RADIO GROUP

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 1141	Wrangell	AK	99929	+1 (907) 874- 2345	cindy@kstk.

2. Contact Representative

Name	Organization
Cindy Sweat	Wrangell Radio Group

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 1141	Wrangell	AK	99929	+1 (907) 874-2345	cindy@kstk.org

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits Licensee				
Is the Respondent's governing boat indirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No		

(b) Provide the following information about this report:				
Purpose	Biennial			
"As of" date	10/01/2017			
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.			

5. Licensee(s) and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name	FRN
Licensee/Permittee Name	FRN

WRANGELL RADIO GROUP	0006160949
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Fac. ID No.	Call Sign	City	State	Service
73924	KSTK	WRANGELL	AK	FM

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Not Applicable.

2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information				
FRN	0006160949			
Entity Name	WRANGELL RADIO GROUP			
Address	PO Box 1141			
	Street 1			
	Street 2			
	City Wrangell State ("NA" if non-U.S. AK address)			
	Zip/Postal Code	99929		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%		
	Equity	0.0%	0.0%	
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this	No			

Ownership Information				
FRN	9990130856	9990130856		
Name	Collin Dando			
Address	PO Box			
	Street 1	106 Lynch St. Apt. 5		
	Street 2			
	City	Wrangell		
	State ("NA" if non-U.S. address)	AK		
	Zip/Postal Code	99929		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Accountant	Accountant		
By Whom Appointed or Elected	Membership	Membership		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No	

Ownership Information		
FRN	9990130860	
Name	Devyn Johnson	
Address	PO Box	

	Street 1	103 Park Ave		
	Street 2			
	City	Wrangell		
	State ("NA" if non-U.S. address)	AK		
	Zip/Postal Code	99929		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Administrative Assistant			
By Whom Appointed or Elected	Board Appointed			
Citizenship, Gender,	Citizenship	us		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No	

Ownership Information			
FRN	9990130862		
Name	JeanMarie Arnold		
Address	PO Box		
	Street 1	525 Zimovia Hwy	
	Street 2		
	City	Wrangell	
	State ("NA" if non-U.S. address)	AK	
	Zip/Postal Code 99929		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		

Principal Profession or Occupation	Case Manager		
By Whom Appointed or Elected	Membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information			
FRN	0027020346		
Name	Angela Flickinger		
Address	PO Box		
	Street 1	53 Pan Handle Trailer Court	
	Street 2		
	City	Wrangell	
	State ("NA" if non-U.S. address)	AK	
	Zip/Postal Code	99929	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Self Employed		
By Whom Appointed or Elected	Membership		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

Total assets (Equi	ty Debt 0.0%	
Does interest holder have an attributable interest that do not appear on this report?	t in one or more broadcast station	s No

Ownership Information			
FRN	9990130866		
Name	Nola Walker		
Address	РО Вох		
	Street 1	520 Church St	
	Street 2		
	City	Wrangell	
	State ("NA" if non-U.S. address)	AK	
	Zip/Postal Code	99929	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired		
By Whom Appointed or Elected	Membership		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have at that do not appear on this re	n attributable interest in one of eport?	r more broadcast stations No	

Ownership Information			
FRN	9990130868		
Name	Walter Moorhead		
Address	PO Box		
	Street 1	117 Mt. Dewey Ln.	
	Street 2		

	City	Wrangell		
	State ("NA" if non-U.S. address)	AK		
	Zip/Postal Code	99929		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Home Remodeler			
By Whom Appointed or Elected	Membership			
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US		
	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No	

Ownership Information			
FRN	9990130874		
Name	Andrea Laughlin		
Address	PO Box 515		
	Street 1		
	Street 2		
	City Wrangell State ("NA" if non-U.S. AK address) Zip/Postal Code 99929		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Accountant		

By Whom Appointed or Elected	Board Appointed			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%		
	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No	
	nat any interests, including equi his filing are non-attributable.	ty, financial, or voting	Yes	

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	

3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

Wrangell Radio Group No Parent Entity

Section III - Certification

Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON	
	THIS FORM ARE PUNISHABLE BY	
	FINE AND/OR IMPRISONMENT (U.S.	
	CODE, TITLE 18, SECTION 1001), AND	
	/OR REVOCATION OF ANY STATION	
	LICENSEOR CONSTRUCTION	
	PERMIT (U.S. CODE, TITLE 47,	
	SECTION 312(a)(1)), AND/OR	
	FORFEITURE (U.S. CODE, TITLE 47,	
	SECTION 503).	

Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: General Manager Exact Legal Title or Name of Respondent: General Manager - Cindy Sweat Name: Cindy Sweat Phone: 9078742345
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